

**DECLARATION OF DANNA DRUM**

Regarding the National Initiative to Address COVID-19 Health Disparities  
Among Populations at High-Risk and Underserved, Including Racial  
and Ethnic Minority Populations and Rural Communities

I, Danna Drum, declare as follows:

1. I am a resident of the State of Oregon. I am over the age of 18 and have personal knowledge of all the facts stated herein, except to those matters stated upon information and belief; as to those matters, I believe them to be true. If called as a witness, I could and would testify competently to the matters set forth below.

2. I am currently employed by the Oregon Health Authority as Interim Deputy Director of the Public Health Division.

3. As Interim Deputy Director, I am responsible for: Serving as the second in command and back up leader to the state Public Health Director with ability to perform all statutory functions for her in her absence; Leading division- and public health system-wide initiatives impacting the direction and budget for all division programs and operations with a focus on quality and elimination of health inequities; Maintaining constant awareness of public health risks and opportunities; Ensuring that the science and practice of public health are applied to programs, with science and community needs guiding the division's direction; and serving as senior advisor for the Public Health Director and division executive leadership team.

4. Our agency recently received one (1) award termination from the U.S. Department of Health and Human Services, Centers for Disease Control and Prevention relating to the National Initiative to Address COVID-19 Health Disparities Among Populations at High-Risk and Underserved, Including Racial and Ethnic Minority Populations and Rural Communities. The total value of the terminated award was \$33,925,082. The termination was "for cause" based on the end of the COVID pandemic, rather than failure of the Oregon Health

Authority to follow the terms or conditions of the grant. A description of the award and the effects of the termination follow.

5. In 2021, the Department of Health and Human Services, Centers for Disease Control and Prevention invited applications for National Initiative to Address COVID-19 Health Disparities Among Populations at High-Risk and Underserved, Including Racial and Ethnic Minority Populations and Rural Communities.

6. The Request for Application (RFA) stated that the funding would be used to strengthen public health infrastructure, preparedness and response capabilities and services to address “COVID\_19 related health disparities and advance health equity in underserved and disproportionately affected populations with a focus on developing partnerships and collaborations with existing community and service delivery programs for African American, Hispanic, Asian American, Pacific Islander, Native American, and other racial and ethnic minority groups or people living in rural communities. The RFA specifically stated “all strategies should aim to build infrastructures that both address disparities in the current COVID-19 pandemic and set the foundation to address future responses.” While these funds had a specific COVID-19 focus, there was also a broader focus to support emerging response efforts with disproportionate community-specific and rural impacts. Repeatedly, when Oregon used the infrastructure that was continuing to be built and financially supported by these grant funds to support other real-time emerging responses (such as mpox, summer wildfires, a measles outbreak, opioid overdose epidemic, and domestic wells crisis in rural Oregon), in addition to COVID-19 response and recovery, to address disproportionate community-specific and rural impacts, CDC staff verbally affirmed and encouraged this approach within the parameters of this grant funding.

7. As set out in its grant proposal, Oregon Health Authority intended to use the National Initiative to Address COVID-19 Health Disparities Among Populations at High-Risk and Underserved, Including Racial and Ethnic Minority Populations and Rural Communities funding to:

- Build capacity across and fund community-based organizations to provide community-specific responsive wraparound services and recovery supports, including those that address the root causes of health inequities.
- Build capacity across and fund the federally-recognized Tribes and the Urban Indian program to provide community-specific responsive case investigation, contact tracing, wraparound services and recovery supports including those that address the root causes of health inequities.
- Facilitate community leadership for the Oregon State Health Improvement Plan as a method for addressing social and structural conditions that place communities of color, Tribal communities, and rural communities at higher risk for COVID-19.
- Convene communities to identify priorities for learning and community support and collectively develop community-specific outreach and engagement plans for priority populations to address health disparities.
- Diversify PHD's workforce by recruiting staff who represent the communities we serve and are most impacted by health inequities and through workforce development strategies that retain and support employee growth.
- Provide technical assistance and training for Local Public Health Authorities on the implementation of local health equity plans.

- Establish an Equity Team within the Oregon Health Authority Public Health Division (PHD) to provide support for local public health authorities, federally-recognized Tribes, community-based organizations, rural health partners and PHD programs and staff to guide public health system priorities for communities at higher-risk for COVID-19 and historically marginalized.

This funding addresses critical infrastructure needs for which no other federal funding sources are available. A few examples include:

- Federally-recognized Tribes have established and are maintaining new infrastructure to have ability to respond in timely manner to health, life safety, and other immediate needs in an emergency response, while also being able to leverage that infrastructure for ongoing supports that promote community, family and individual preparedness and resilience.
- Community-based organizations (CBOs) have resources and training that would not otherwise be available for infrastructure and services that support communities, individuals and families needing to protect themselves and their communities from further spread of disease. In addition, these CBO resources and infrastructure support timely easy-to-understand information about how to prevent spread of COVID-19 and other diseases (such as mpox and measles) and how to protect their communities from emerging threats such as wildfires, heat-related events, and contaminated drinking water.
- PHD has infrastructure that supports multi-directional communication channels to receive information from and provide culturally responsive information to

specific communities experiencing the greatest effects of emerging and ongoing public health threats, including COVID-19.

8. After submission of Oregon Health Authority's grant application in response to the Request for Application for National Initiative to Address COVID-19 Health Disparities Among Populations at High-Risk and Underserved, Including Racial and Ethnic Minority Populations and Rural Communities on April 29, 2021, OHA received a Notice of Award on May 28, 2021 that outlined the specific terms of the award, including an initial performance and budget period of June 1, 2021 through May 31, 2023, total funding amount of \$33,925,082, and linked to the CDC General Terms and Conditions for Non-research awards. Oregon Health Authority submitted requests and received approval for two subsequent no cost extensions. The first extension extended the performance and budget period to May 31, 2024. The second extension extended the performance and budget period to May 31, 2026.

9. On May 28, 2021, the Centers for Disease Control and Prevention produced a Notice of Award (1 NH75OT000029-01-00) setting forth the terms and conditions of the grant award. A true and correct copy of the corresponding Notice of Award and its attachments, dated May 28, 2021, is attached as Exhibit A. As set forth therein, termination of the grant by the Centers for Disease Control and Prevention is permitted only as outlined in 45 CFR 75.372.

10. Since June 2021, Oregon Health Authority has used the National Initiative to Address COVID-19 Health Disparities Among Populations at High-Risk and Underserved, Including Racial and Ethnic Minority Populations and Rural Communities grant funds in a manner fully consistent with the Centers for Disease Control and Prevention's statements regarding the nature of the grant and Oregon Health Authority's grant application.

11. Oregon Health Authority has used and expended these funds to support multiple staff positions, contracts, and grants to community-based organizations, federally-recognized Tribes, and the Urban Indian Program in support of approved work plan objectives and activities as previously described. Currently the funding supports approximately nine full-time equivalent positions.

12. As of March 24, 2025, approximately \$8,175,467 remained of the \$33,925,082 committed by the Centers for Disease Control and Prevention. The performance period end date was May 31, 2026. These funds would have been used to support staff positions, grants, and contracts to continue progress toward previously approved work plan objectives and activities. Oregon Health Authority through the Oregon Department of Human Services Office of Financial Services executes monthly draw downs for expenditures incurred for this grant from the federal Payment Management System. The next draw down would have occurred on April 25, 2025.

13. Oregon Health Authority has submitted required reports related to this grant funding to the Centers for Disease Control and Prevention in a timely manner and has remained in regular communication with the assigned project officer to discuss progress and questions related to this grant. In addition, Oregon Health Authority staff attended all virtual and in-person meetings as required. CDC staff have consistently provided positive and encouraging feedback on Oregon Health Authority's work under this grant.

14. Oregon Health Authority submitted requests and received approval for two budget revisions and no cost extensions. The first request was approved and extended the performance and budget period to May 31, 2024. The second extension was approved and the performance and budget period to May 31, 2026. True and correct copies of these Notices of Award are included in Exhibit A.

15. On March 25, 2025, without any prior notice or indication, the Centers for Disease Control and Prevention informed Oregon Health Authority that effective March 24, 2025 its National Initiative to Address COVID-19 Health Disparities Among Populations at High-Risk and Underserved, Including Racial and Ethnic Minority Populations and Rural Communities was being terminated as of March 24, 2025. A true and correct copy of the grant award termination notice is attached as Exhibit B.

16. The purported basis for the termination was “for cause,” as stated in the notice: “The termination of this award is for cause. HHS regulations permit termination if “the non-Federal entity fails to comply with the terms and conditions of the award”, or separately, “for cause.” The end of the pandemic provides cause to terminate COVID-related grants and cooperative agreements. These grants and cooperative agreements were issued for a limited purpose: to ameliorate the effects of the pandemic. Now that the pandemic is over, the grants and cooperative agreements are no longer necessary as their limited purpose has run out. Termination of this award is effective as of the date set out in your Notice of Award. No additional activities can be conducted, and no additional costs may be incurred. Unobligated award balances will be de-obligated by CDC.”

17. The termination notice was sent to Oregon Health Authority the day after the termination date with no notice. The notice stated that all closeout reports are due within thirty (30) days of the notice. Centers for Disease Control and Prevention Terms and Conditions state a 120-day closeout period. No information about appeal rights and process were included in the notice.

18. Oregon Health Authority relied and acted upon its expectation and understanding that the Centers for Disease Control and Prevention would fulfill its commitment to provide

National Initiative to Address COVID-19 Health Disparities Among Populations at High-Risk and Underserved, Including Racial and Ethnic Minority Populations and Rural Communities funding it had awarded to the Oregon Health Authority. Due to lack of prior notice of termination of funds, Oregon Health Authority is incurring financial costs for staff, contract and grant expenses due to the time required to identify impacts and to follow processes to address staff and contractual impacts. An even greater, longer-lasting and less reversible impact is the loss of trust with staff, contractors, grantees, and partners when their funding is abruptly ended in the middle of their important work to support the health of communities historically disproportionately impacted by health inequities.

19. Specific harms caused by the sudden termination of include: Immediate termination of funding to federally-recognized Tribes to support critical public health infrastructure; Cancellation or reduction of already scheduled activities for which the Oregon Health Authority will incur cancellation costs; Cancellation of contracts and grants for work that was mid-stream and were funding staff in those organizations; Damage to relationships with partners due to sudden loss of funding.

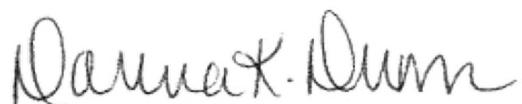
20. Prior to the grant award termination on March 24, 2025, the Centers for Disease Control and Prevention had never provided Oregon Health Authority with notice, written or otherwise, that the grant administered by the Centers for Disease Control and Prevention was in any way unsatisfactory.

21. The termination of the National Initiative to Address COVID-19 Health Disparities Among Populations at High-Risk and Underserved, Including Racial and Ethnic Minority Populations and Rural Communities funding to the Oregon Health Authority will have long-lasting impacts on the Oregon Health Authority's ability to support with resources, training

and information, as well as and maintain trust with, communities historically and disproportionately affected by public health inequities. These harms will inhibit Oregon Health Authority, Tribes, and others' abilities to be responsive to community needs during future emerging public health threats.

I declare under penalty of perjury under the laws of the United States that, to the best of my knowledge, the foregoing is true and correct.

Executed on March 28 2025, at Portland, Oregon.



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Danna K. Drum

**Recipient Information****1. Recipient Name**

Oregon Health Authority, Public Health Division  
 500 Summer St Ne E32  
 Public Health Division  
 SALEM, OR 97301-1063  
 [NoPhoneRecord]

**2. Congressional District of Recipient**

05

**3. Payment System Identifier (ID)**

1936001752A1

**4. Employer Identification Number (EIN)**

936001752

**5. Data Universal Numbering System (DUNS)**

878144021

**6. Recipient's Unique Entity Identifier****7. Project Director or Principal Investigator**

Cara Biddlecom  
 cara.m.biddlecom@state.or.us  
 971-673-2284

**8. Authorized Official**

Ms. Carole L. Yann  
 Director of Fiscal and Business Operations  
 CAROLE.L.YANN@dhsowa.state.or.us  
 971-673-1079

**Federal Agency Information**

CDC Office of Financial Resources

**9. Awarding Agency Contact Information**

Mr. Dedrick Muhammad  
 Grants Management Specialist  
 qtm2@cdc.gov  
 678-475-4523

**10. Program Official Contact Information**

Ms. Christine Graaf  
 khx2@cdc.gov  
 404-498-0442

**30. Remarks****Federal Award Information****11. Award Number**

1 NH75OT000029-01-00

**12. Unique Federal Award Identification Number (FAIN)**

NH75OT000029

**13. Statutory Authority**

317(K)(2) OF PHSA 42USC 247B(K)(2)

**14. Federal Award Project Title**

Oregon proposes a comprehensive strategy to eliminate COVID-19 health inequities while building a sustainable governmental and community-based public health workforce.

**15. Assistance Listing Number**

93.391

**16. Assistance Listing Program Title**

Activities to Support State, Tribal, Local and Territorial (STLT) Health Department Response to Public Health or Healthcare Crises

**17. Award Action Type**

New

**18. Is the Award R&D?**

No

**Summary Federal Award Financial Information****19. Budget Period Start Date** 06/01/2021 - **End Date** 05/31/2023**20. Total Amount of Federal Funds Obligated by this Action** \$33,925,082.00

20a. Direct Cost Amount	\$30,459,249.00
20b. Indirect Cost Amount	\$3,465,833.00

**21. Authorized Carryover**

\$0.00

**22. Offset**

\$0.00

**23. Total Amount of Federal Funds Obligated this budget period**

\$0.00

**24. Total Approved Cost Sharing or Matching, where applicable**

\$0.00

**25. Total Federal and Non-Federal Approved this Budget Period**

\$33,925,082.00

**26. Project Period Start Date** 06/01/2021 - **End Date** 05/31/2023**27. Total Amount of the Federal Award including Approved Cost Sharing or Matching this Project Period**

Not Available

**28. Authorized Treatment of Program Income**

ADDITIONAL COSTS

**29. Grants Management Officer - Signature**

Ms. Shirley K Byrd  
 Grants Management Officer

**Recipient Information****Recipient Name**

Oregon Health Authority, Public Health Division  
 500 Summer St Ne E32  
 Public Health Division  
 SALEM, OR 97301-1063  
 [NoPhoneRecord]

**Congressional District of Recipient**

05

**Payment Account Number and Type**

1936001752A1

**Employer Identification Number (EIN) Data**

936001752

**Universal Numbering System (DUNS)**

878144021

**Recipient's Unique Entity Identifier**

Not Available

**31. Assistance Type**

Project Grant

**32. Type of Award**

Other

**33. Approved Budget**

(Excludes Direct Assistance)

I. Financial Assistance from the Federal Awarding Agency Only	
II. Total project costs including grant funds and all other financial participation	
a. Salaries and Wages	\$2,702,932.00
b. Fringe Benefits	\$1,459,583.00
c. Total Personnel Costs	\$4,162,515.00
d. Equipment	\$0.00
e. Supplies	\$42,070.00
f. Travel	\$264,108.00
g. Construction	\$0.00
h. Other	\$479,910.00
i. Contractual	\$25,510,646.00
j. TOTAL DIRECT COSTS	\$30,459,249.00
k. INDIRECT COSTS	\$3,465,833.00
l. TOTAL APPROVED BUDGET	\$33,925,082.00
m. Federal Share	\$33,925,082.00
n. Non-Federal Share	\$0.00

**34. Accounting Classification Codes**

FY-ACCOUNT NO.	DOCUMENT NO.	ADMINISTRATIVE CODE	OBJECT CLASS	AMT ACTION FINANCIAL ASSISTANCE	APPROPRIATION
1-9390H06	21NH75OT000029C5	OT	41.51	\$33,925,082.00	75-2122-0140

**DEPARTMENT OF HEALTH AND HUMAN SERVICES Notice of Award**

Centers for Disease Control and Prevention

Award# 1 NH75OT000029-01-00

FAIN# NH75OT000029

Federal Award Date: 05/28/2021

**Direct Assistance**

BUDGET CATEGORIES	PREVIOUS AMOUNT (A)	AMOUNT THIS ACTION (B)	TOTAL (A + B)
Personnel	\$ 0.00	\$ 0.00	\$ 0.00
Fringe Benefits	\$ 0.00	\$ 0.00	\$ 0.00
Travel	\$ 0.00	\$ 0.00	\$ 0.00
Equipment	\$ 0.00	\$ 0.00	\$ 0.00
Supplies	\$ 0.00	\$ 0.00	\$ 0.00
Contractual	\$ 0.00	\$ 0.00	\$ 0.00
Construction	\$ 0.00	\$ 0.00	\$ 0.00
Other	\$ 0.00	\$ 0.00	\$ 0.00
Total	\$ 0.00	\$ 0.00	\$ 0.00

## AWARD ATTACHMENTS

Oregon Health Authority, Public Health Division

1 NH75OT000029-01-00

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### 1. Terms and Conditions

**Recipient:** Oregon Health Authority: Oregon Public Health Division

## AWARD INFORMATION

**Incorporation:** In addition to the federal laws, regulations, policies, and CDC General Terms and Conditions for Non-research awards at <https://www.cdc.gov/grants/federalregulationspolicies/index.html>, the Centers for Disease Control and Prevention (CDC) hereby incorporates Notice of Funding Opportunity (NOFO) number CDC-RFA-OT21-2103, entitled National Initiative to Address COVID-19 Health Disparities Among Populations at High-Risk and Underserved, Including Racial and Ethnic Minority Populations and Rural Communities, and application dated April 29, 2021, as may be amended, which are hereby made a part of this Non-research award, hereinafter referred to as the Notice of Award (NoA).

**Approved Funding:** Funding in the amount of \$33,925,082 is approved for a two year performance and budget period, which is June 1, 2021 through May 31, 2023. All future funding will be based on satisfactory programmatic progress and the availability of funds.

The federal award amount is subject to adjustment based on total allowable costs incurred and/or the value of any third party in-kind contribution when applicable.

Note: Refer to the Payment Information section for Payment Management System (PMS) subaccount information.

**Component/Project Funding:** The NOFO provides for the funding of multiple components under this award. The approved component funding levels for this notice of award are:

NOFO Component	Amount
Base funding	\$26,399,834
State Rural Carveout	\$7,525,248

**Coronavirus Disease 2019 (COVID-19) Funds:** A recipient of a grant or cooperative agreement awarded by the Department of Health and Human Services (HHS) with funds made available under the Coronavirus Preparedness and Response Supplemental Appropriations Act, 2020 (P.L. 116-123); the Coronavirus Aid, Relief, and Economic Security Act, 2020 (the "CARES Act") (P.L. 116-136); the Paycheck Protection Program and Health Care Enhancement Act (P.L. 116-139); the Consolidated Appropriations Act and the Coronavirus Response and Relief Supplement Appropriations Act, 2021 (P.L. 116-260) and/or the American Rescue Plan of 2021 [P.L. 117-2] agrees, as applicable to the award, to: 1) comply with existing and/or future directives and guidance from the Secretary regarding control of the spread of COVID-19; 2) in consultation and coordination with HHS, provide, commensurate with the condition of the individual, COVID-19 patient care regardless of the individual's home jurisdiction and/or appropriate public health measures (e.g., social distancing, home isolation); and 3) assist the United States Government in the implementation and enforcement of federal orders related to quarantine and isolation.

In addition, to the extent applicable, Recipient will comply with Section 18115 of the CARES Act, with respect to the reporting to the HHS Secretary of results of tests intended to detect SARS-CoV-2 or to diagnose a possible case of COVID-19. Such reporting shall be in accordance with

guidance and direction from HHS and/or CDC. HHS laboratory reporting guidance is posted at: <https://www.hhs.gov/sites/default/files/covid-19-laboratory-data-reporting-guidance.pdf>.

Further, consistent with the full scope of applicable grant regulations (45 C.F.R. 75.322), the purpose of this award, and the underlying funding, the recipient is expected to provide to CDC copies of and/or access to COVID-19 data collected with these funds, including but not limited to data related to COVID-19 testing. CDC will specify in further guidance and directives what is encompassed by this requirement.

This award is contingent upon agreement by the recipient to comply with existing and future guidance from the HHS Secretary regarding control of the spread of COVID-19. In addition, recipient is expected to flow down these terms to any subaward, to the extent applicable to activities set out in such subaward.

#### **Financial Assistance Mechanism: Grant**

**Pre-Award Costs:** Pre-award costs dating back to March 15, 2021 – and directly related to the COVID-19 outbreak response are allowable.

#### **FUNDING RESTRICTIONS AND LIMITATIONS**

##### **Indirect Costs:**

Indirect costs are approved based on the recipient's approved Cost Allocation Plan dated September 5, 2019.

#### **REPORTING REQUIREMENTS**

**Required Disclosures for Federal Awardee Performance and Integrity Information System (FAPIIS):** Consistent with 45 CFR 75.113, applicants and recipients must disclose in a timely manner, in writing to the CDC, with a copy to the HHS Office of Inspector General (OIG), all information related to violations of federal criminal law involving fraud, bribery, or gratuity violations potentially affecting the federal award. Subrecipients must disclose, in a timely manner in writing to the prime recipient (pass through entity) and the HHS OIG, all information related to violations of federal criminal law involving fraud, bribery, or gratuity violations potentially affecting the federal award. Disclosures must be sent in writing to the CDC and to the HHS OIG at the following addresses:

CDC, Office of Grants Services  
Dedrick Muhammad, Grants Management Specialist  
Centers for Disease Control and Prevention  
Global Health Services Branch  
2939 Flowers Road  
Atlanta, GA 30341  
Email: qtm2@cdc.gov (Include "Mandatory Grant Disclosures" in subject line)

AND

U.S. Department of Health and Human Services  
Office of the Inspector General

ATTN: Mandatory Grant Disclosures, Intake Coordinator  
330 Independence Avenue, SW  
Cohen Building, Room 5527  
Washington, DC 20201

Fax: (202)-205-0604 (Include "Mandatory Grant Disclosures" in subject line) or  
Email: [MandatoryGranteeDisclosures@oig.hhs.gov](mailto:MandatoryGranteeDisclosures@oig.hhs.gov)

Recipients must include this mandatory disclosure requirement in all subawards and contracts under this award.

Failure to make required disclosures can result in any of the remedies described in 45 CFR 75.371. Remedies for noncompliance, including suspension or debarment (See 2 CFR parts 180 and 376, and 31 U.S.C. 3321).

CDC is required to report any termination of a federal award prior to the end of the period of performance due to material failure to comply with the terms and conditions of this award in the OMB-designated integrity and performance system accessible through SAM (currently FAPIIS). (45 CFR 75.372(b)) CDC must also notify the recipient if the federal award is terminated for failure to comply with the federal statutes, regulations, or terms and conditions of the federal award. (45 CFR 75.373(b))

#### PAYMENT INFORMATION

*The HHS Office of the Inspector General (OIG) maintains a toll-free number (1-800-HHS-TIPS [1-800-447-8477]) for receiving information concerning fraud, waste, or abuse under grants and cooperative agreements. Information also may be submitted by e-mail to [hstips@oig.hhs.gov](mailto:hstips@oig.hhs.gov) or by mail to Office of the Inspector General, Department of Health and Human Services, Attn: HOTLINE, 330 Independence Ave., SW, Washington DC 20201. Such reports are treated as sensitive material and submitters may decline to give their names if they choose to remain anonymous.*

**Payment Management System Subaccount:** Funds awarded in support of approved activities have been obligated in a subaccount in the PMS, herein identified as the "P Account". Funds must be used in support of approved activities in the NOFO and the approved application.

The grant document number identified on the bottom of Page 1 of the Notice of Award must be known in order to draw down funds.

#### PROGRAM OR FUNDING SPECIFIC CLOSEOUT REQUIREMENTS

The final programmatic report format required is the following.

**Final Performance Progress and Evaluation Report:** This report should include the information specified in the NOFO and is submitted 90 days following the end of the period of performance via [www.grantsolutions.gov](http://www.grantsolutions.gov). At a minimum, the report will include the following:

- Statement of progress made toward the achievement of originally stated aims.
- Description of results (positive or negative) considered significant.
- List of publications resulting from the project, with plans, if any, for further

publication.

Additional guidance may be provided by the GMS and found at:  
<https://www.cdc.gov/grants/alreadyhavegrant/Reporting.html>

### CDC Staff Contacts

**Grants Management Specialist:** The GMS is the federal staff member responsible for the day-to-day management of grants and cooperative agreements. The GMS is the primary contact of recipients for business and administrative matters pertinent to grant awards.

**Program/Project Officer:** The PO is the federal official responsible for monitoring the programmatic, scientific, and/or technical aspects of grants and cooperative agreements, as well as contributing to the effort of the award under cooperative agreements.

**Grants Management Officer:** The GMO is the federal official responsible for the business and other non-programmatic aspects of grant awards. The GMO is the only official authorized to obligate federal funds and is responsible for signing the NoA, including revisions to the NoA that change the terms and conditions. The GMO serves as the counterpart to the business officer of the recipient organization.



Award# 6 NH75OT000029-01-02

FAIN# NH75OT000029

Federal Award Date: 11/16/2022

**Recipient Information****1. Recipient Name**

HUMAN SERVICES, OREGON DEPARTMENT  
OF  
500 SUMMER ST NE E32  
Oregon Health Authority, Public Health Division  
SALEM, OR 97301-1064  
[NoPhoneRecord]

**2. Congressional District of Recipient**

05

**3. Payment System Identifier (ID)**

1936001752A1

**4. Employer Identification Number (EIN)**

936001752

**5. Data Universal Numbering System (DUNS)**

878144021

**6. Recipient's Unique Entity Identifier (UEI)**

HFJRBHKCBPR5

**7. Project Director or Principal Investigator**

Ms. Erica Sandoval  
erica.sandoval@dhsoha.state.or.us  
971-673-2282

**8. Authorized Official**

Ms. Nadia A. Davidson  
Director of Finance  
Nadia.A.Davidson@state.or.us  
503-798-6020

**Federal Agency Information**

CDC Office of Financial Resources

**9. Awarding Agency Contact Information**

Jo-Anne Saunders  
Grants Management Specialist  
srq1@cdc.gov  
4044985235

**10. Program Official Contact Information**

Christie Chadwell  
Program Officer  
lwg1@cdc.gov  
404-498-5502

**30. Remarks****Federal Award Information****11. Award Number**

6 NH75OT000029-01-02

**12. Unique Federal Award Identification Number (FAIN)**

NH75OT000029

**13. Statutory Authority**

317(K)(2) OF PHSA 42USC 247B(K)(2)

**14. Federal Award Project Title**

Oregon proposes a comprehensive strategy to eliminate COVID-19 health inequities while building a sustainable governmental and community-based public health workforce.

**15. Assistance Listing Number**

93.391

**16. Assistance Listing Program Title**

Activities to Support State, Tribal, Local and Territorial (STLT) Health Department Response to Public Health or Healthcare Crises

**17. Award Action Type**

Change in Key Personnel

**18. Is the Award R&D?**

No

**Summary Federal Award Financial Information****19. Budget Period Start Date** 06/01/2021 - **End Date** 05/31/2024**20. Total Amount of Federal Funds Obligated by this Action**

\$0.00

20a. Direct Cost Amount

(\$1,621,199.00)

20b. Indirect Cost Amount

\$1,621,199.00

**21. Authorized Carryover**

\$0.00

**22. Offset**

\$0.00

**23. Total Amount of Federal Funds Obligated this budget period**

\$33,925,082.00

**24. Total Approved Cost Sharing or Matching, where applicable**

\$0.00

**25. Total Federal and Non-Federal Approved this Budget Period**

\$33,925,082.00

**26. Period of Performance Start Date** 06/01/2021 - **End Date** 05/31/2024**27. Total Amount of the Federal Award including Approved Cost Sharing or Matching this Period of Performance**

\$33,925,082.00

**28. Authorized Treatment of Program Income**

ADDITIONAL COSTS

**29. Grants Management Officer - Signature**

Ms. Ester Edward

Grants Management Officer



## DEPARTMENT OF HEALTH AND HUMAN SERVICES

Centers for Disease Control and Prevention

## Notice of Award

Award# 6 NH75OT000029-01-02

FAIN# NH75OT000029

Federal Award Date: 11/16/2022

**Recipient Information****Recipient Name**

HUMAN SERVICES, OREGON DEPARTMENT  
OF  
500 SUMMER ST NE E32  
Oregon Health Authority, Public Health Division  
SALEM, OR 97301-1064

**[NoPhoneRecord] Congressional District of Recipient**

05

**Payment Account Number and Type**

1936001752A1

**Employer Identification Number (EIN) Data**

936001752

**Universal Numbering System (DUNS)**

878144021

**Recipient's Unique Entity Identifier (UEI)**

HFJRBHKCBPRS

**31. Assistance Type**

Project Grant

**32. Type of Award**

Other

**33. Approved Budget**

(Excludes Direct Assistance)

I. Financial Assistance from the Federal Awarding Agency Only	
II. Total project costs including grant funds and all other financial participation	
a. Salaries and Wages	\$4,761,920.00
b. Fringe Benefits	\$2,857,152.00
c. Total Personnel Costs	\$7,619,072.00
d. Equipment	\$0.00
e. Supplies	\$53,230.00
f. Travel	\$264,108.00
g. Construction	\$0.00
h. Other	\$479,910.00
i. Contractual	\$20,421,730.00
j. TOTAL DIRECT COSTS	\$28,838,050.00
k. INDIRECT COSTS	\$5,087,032.00
l. TOTAL APPROVED BUDGET	\$33,925,082.00
m. Federal Share	\$33,925,082.00
n. Non-Federal Share	\$0.00

**34. Accounting Classification Codes**

FY-ACCOUNT NO.	DOCUMENT NO.	ADMINISTRATIVE CODE	OBJECT CLASS	CFDA NO.	AMT ACTION FINANCIAL ASSISTANCE	APPROPRIATION
1-9390H06	21NH75OT000029C5	OT	41.51	93.391	\$0.00	75-2122-0140



## DEPARTMENT OF HEALTH AND HUMAN SERVICES Notice of Award

Centers for Disease Control and Prevention

Award# 6 NH75OT000029-01-02

FAIN# NH75OT000029

Federal Award Date: 11/16/2022

## Direct Assistance

BUDGET CATEGORIES	PREVIOUS AMOUNT (A)	AMOUNT THIS ACTION (B)	TOTAL (A + B)
Personnel	\$0.00	\$0.00	\$0.00
Fringe Benefits	\$0.00	\$0.00	\$0.00
Travel	\$0.00	\$0.00	\$0.00
Equipment	\$0.00	\$0.00	\$0.00
Supplies	\$0.00	\$0.00	\$0.00
Contractual	\$0.00	\$0.00	\$0.00
Construction	\$0.00	\$0.00	\$0.00
Other	\$0.00	\$0.00	\$0.00
Total	\$0.00	\$0.00	\$0.00

## AWARD ATTACHMENTS

HUMAN SERVICES, OREGON DEPARTMENT OF

6 NH75OT000029-01-02

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1. Terms and Conditions

## REVISED TERMS AND CONDITIONS OF AWARD

**Key Personnel:** The purpose of this amendment is to approve the Authorizing Official Representative change to Nadia Davidson. This is in response to the request submitted by your organization dated October 21, 2022.

**No Cost Extension:** The purpose of this amendment is to approve a -12month No-Cost Extension per the request submitted by your organization dated October 26, 2022. The budget and project period end dates have been extended from May 31, 2023 to May 31, 2024.

**Annual Federal Financial Report (FFR SF-425):** Annual financial reporting is required every twelve-month period. Due to the approved extension period, the final budget period has been extended and an additional annual financial report will be required. A completed FFR SF-425 covering the budget period of June 1, 2022 to May 31, 2023 must be submitted by August 31, 2023.

Recipients must submit all closeout reports identified in this section within 90 days of the period of performance end date. The reporting timeframe is the full period of performance. Failure to submit timely and accurate final reports may affect future funding to the organization or awards under the direction of the same Project Director/Principal Investigator (PD/PI).

**Final Performance Progress and Evaluation Report:** This report should include the information specified in the NOFO and is submitted 90 days following the end of the period of performance via [www.grantsolutions.gov](http://www.grantsolutions.gov). At a minimum, the report will include the following:

1. Statement of progress made toward the achievement of originally stated aims.
2. Description of results (positive or negative) considered significant.
3. List of publications resulting from the project, with plans, if any, for further publication.

Additional guidance may be provided by the GMS and found at:

<https://www.cdc.gov/grants/alreadyhavegrant/Reporting.html>

**Final Federal Financial Report (FFR, SF-425):** The FFR should only include those funds authorized and actually expended during the timeframe covered by the report. The Final FFR, SF-425 is required and must be submitted no later than 90 days after the period of performance end date.

The final report must indicate the exact balance of unobligated funds and may not reflect any unliquidated obligations. Should the amount not match with the final expenditures reported to the Department of Health and Human Services' PMS, you will be required to update your reports to PMS accordingly. Remaining unobligated funds will be de-obligated and returned to the U.S. Treasury.

**Equipment and Supplies - Tangible Personal Property Report (SF-428):** A completed Tangible Personal Property Report SF-428 and Final Report SF-428B addendum must be submitted, along with any Supplemental Sheet SF-428S detailing all major equipment acquired or furnished under this project with a unit acquisition cost of \$5,000 or more. Electronic versions of the forms can be downloaded by visiting:  
<https://www.grants.gov/web/grants/forms/post-award-reporting-forms.html#sortby=1>

If no equipment was acquired under an award, a negative report is required.

The recipient must identify each item of equipment that it wishes to retain for continued use in accordance with 45 CFR Part 75. The awarding agency may exercise its rights to require the transfer of equipment purchased under the assistance award. CDC will notify the recipient if transfer to title will be required and provide disposition instruction on all major equipment.

Equipment with a unit acquisition cost of less than \$5,000 that is no longer to be used in projects or programs currently or previously sponsored by the Federal Government may be retained, sold, or otherwise disposed of, with no further obligation to the Federal Government.

**Stewardship:** Please be advised that the recipient must exercise proper stewardship over Federal funds by ensuring that all costs charged to their cooperative agreement are allowable, allocable, necessary, and reasonable.

All other terms and conditions issued with the original award remain in effect throughout the budget period unless otherwise changed in writing, by the Grants Management Officer.

**PLEASE REFERENCE AWARD NUMBER ON ALL CORRESPONDENCE**



## DEPARTMENT OF HEALTH AND HUMAN SERVICES

Centers for Disease Control and Prevention

## Notice of Award

Award# 6 NH75OT000029-01-04

FAIN# NH75OT000029

Federal Award Date: 02/28/2024

**Recipient Information****1. Recipient Name**

OREGON HEALTH AUTHORITY  
 500 SUMMER ST NE E32  
 Oregon Health Authority, Public Health Division  
 SALEM, OR 97301-1064  
 [NO DATA]

**2. Congressional District of Recipient**

05

**3. Payment System Identifier (ID)**

1936001752A1

**4. Employer Identification Number (EIN)**

936001752

**5. Data Universal Numbering System (DUNS)**

878144021

**6. Recipient's Unique Entity Identifier (UEI)**

HFJRBHKCBP5

**7. Project Director or Principal Investigator**

Miss Paulina Almaraz  
 Community-Specific Strategies Manager  
 paulina.b.almaraz@oha.oregon.gov  
 971.673.2284

**8. Authorized Official**

Ms. Nadia A. Davidson  
 Director of Finance  
 Nadia.A.Davidson@state.or.us  
 503-798-6020

**Federal Agency Information**

CDC Office of Financial Resources

**9. Awarding Agency Contact Information**

Jo-Anne Saunders  
 Grants Management Specialist  
 srq1@cdc.gov  
 4044985235

**10. Program Official Contact Information**

Nathan Griffin  
 Program Officer  
 scq8@cdc.gov  
 111-111-1111

**30. Remarks****Federal Award Information****11. Award Number**

6 NH75OT000029-01-04

**12. Unique Federal Award Identification Number (FAIN)**

NH75OT000029

**13. Statutory Authority**

317(K)(2) OF PHSA 42USC 247B(K)(2)

**14. Federal Award Project Title**

Oregon proposes a comprehensive strategy to eliminate COVID-19 health inequities while building a sustainable governmental and community-based public health workforce.

**15. Assistance Listing Number**

93.391

**16. Assistance Listing Program Title**

Activities to Support State, Tribal, Local and Territorial (STLT) Health Department Response to Public Health or Healthcare Crises

**17. Award Action Type**

No Cost Extension

**18. Is the Award R&D?**

No

**Summary Federal Award Financial Information****19. Budget Period Start Date** 06/01/2021 - **End Date** 05/31/2026**20. Total Amount of Federal Funds Obligated by this Action**

\$0.00

20a. Direct Cost Amount

\$0.00

20b. Indirect Cost Amount

\$0.00

**21. Authorized Carryover**

\$0.00

**22. Offset**

\$0.00

**23. Total Amount of Federal Funds Obligated this budget period**

\$33,925,082.00

**24. Total Approved Cost Sharing or Matching, where applicable**

\$0.00

**25. Total Federal and Non-Federal Approved this Budget Period**

\$33,925,082.00

**26. Period of Performance Start Date** 06/01/2021 - **End Date** 05/31/2026**27. Total Amount of the Federal Award including Approved Cost Sharing or Matching this Period of Performance**

\$33,925,082.00

**28. Authorized Treatment of Program Income**

ADDITIONAL COSTS

**29. Grants Management Officer - Signature**

Ms. Ester Edward  
 Grants Management Officer



## DEPARTMENT OF HEALTH AND HUMAN SERVICES

Centers for Disease Control and Prevention

## Notice of Award

Award# 6 NH75OT000029-01-04

FAIN# NH75OT000029

Federal Award Date: 02/28/2024

**Recipient Information****Recipient Name**

OREGON HEALTH AUTHORITY

500 SUMMER ST NE E32

Oregon Health Authority, Public Health Division

SALEM, OR 97301-1064

[NO DATA]

**Congressional District of Recipient**

05

**Payment Account Number and Type**

1936001752A1

**Employer Identification Number (EIN) Data**

936001752

**Universal Numbering System (DUNS)**

878144021

**Recipient's Unique Entity Identifier (UEI)**

HFJRBHKCBPRS

**31. Assistance Type**

Project Grant

**32. Type of Award**

Other

**33. Approved Budget**

(Excludes Direct Assistance)

I. Financial Assistance from the Federal Awarding Agency Only	
II. Total project costs including grant funds and all other financial participation	
a. Salaries and Wages	\$4,761,920.00
b. Fringe Benefits	\$2,857,152.00
c. Total Personnel Costs	\$7,619,072.00
d. Equipment	\$0.00
e. Supplies	\$53,230.00
f. Travel	\$264,108.00
g. Construction	\$0.00
h. Other	\$479,910.00
i. Contractual	\$20,421,730.00
j. TOTAL DIRECT COSTS	\$28,838,050.00
k. INDIRECT COSTS	\$5,087,032.00
l. TOTAL APPROVED BUDGET	\$33,925,082.00
m. Federal Share	\$33,925,082.00
n. Non-Federal Share	\$0.00

**34. Accounting Classification Codes**

FY-ACCOUNT NO.	DOCUMENT NO.	ADMINISTRATIVE CODE	OBJECT CLASS	CFDA NO.	AMT ACTION FINANCIAL ASSISTANCE	APPROPRIATION
1-9390H06	21NH75OT000029C5	OT	41.51	93.391	\$0.00	75-2122-0140

**DEPARTMENT OF HEALTH AND HUMAN SERVICES Notice of Award**

Centers for Disease Control and Prevention

Award# 6 NH75OT000029-01-04

FAIN# NH75OT000029

Federal Award Date: 02/28/2024

**Direct Assistance**

BUDGET CATEGORIES	PREVIOUS AMOUNT (A)	AMOUNT THIS ACTION (B)	TOTAL (A + B)
Personnel	\$ 0.00	\$ 0.00	\$ 0.00
Fringe Benefits	\$ 0.00	\$ 0.00	\$ 0.00
Travel	\$ 0.00	\$ 0.00	\$ 0.00
Equipment	\$ 0.00	\$ 0.00	\$ 0.00
Supplies	\$ 0.00	\$ 0.00	\$ 0.00
Contractual	\$ 0.00	\$ 0.00	\$ 0.00
Construction	\$ 0.00	\$ 0.00	\$ 0.00
Other	\$ 0.00	\$ 0.00	\$ 0.00
Total	\$ 0.00	\$ 0.00	\$ 0.00

## AWARD ATTACHMENTS

OREGON HEALTH AUTHORITY

6 NH75OT000029-01-04

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### 1. Terms and Conditions

## ADDITIONAL TERMS AND CONDITIONS OF AWARD

The General Terms and Conditions for non-research grants and cooperative agreements have been updated, effective January 23, 2024, to reflect current regulations and requirements for federal financial assistance.

**No Cost Extension:** The purpose of this amendment is to approve a 24 month No Cost Extension per the request submitted by your organization dated February 14, 2024. The budget and project period end dates have been extended from May 31, 2024 to May 31, 2026.

**Annual Federal Financial Report (FFR SF-425):** Annual financial reporting is required every twelve-month period. Based on the approved no-cost extension, an additional annual financial report will be required. A completed FFR SF-425 covering the budget period of June 1, 2023 to May 31, 2024 must be submitted by August 31, 2024.

**Closeout Requirements:** Recipients must submit all closeout reports within 120 days of the period of performance end date. Standard closeout reporting requirements are identified in the *General Terms and Conditions*, which are published on the CDC website at <https://www.cdc.gov/grants/federal-regulations-policies/index.html>.

**Recipient Information****1. Recipient Name**

OREGON HEALTH AUTHORITY  
500 SUMMER ST NE E32  
Oregon Health Authority, Public Health Division  
SALEM, OR 97301-1064  
[NO DATA]

**2. Congressional District of Recipient**

05

**3. Payment System Identifier (ID)**

1936001752A1

**4. Employer Identification Number (EIN)**

936001752

**5. Data Universal Numbering System (DUNS)**

878144021

**6. Recipient's Unique Entity Identifier (UEI)**

HFJRBHKCBP5

**7. Project Director or Principal Investigator**

Miss Paulina Almaraz  
Community-Specific Strategies Manager  
paulina.b.almaraz@oha.oregon.gov  
971.673.2284

**8. Authorized Official**

Ms. Nadia A. Davidson  
Director of Finance  
Nadia.a.davidson@oha.oregon.gov  
503-798-6020

**Federal Agency Information**

CDC Office of Financial Resources

**9. Awarding Agency Contact Information**

Jo-Anne Saunders  
Grants Management Specialist  
srq1@cdc.gov  
4044985235

**10. Program Official Contact Information**

Nathan Griffin  
Program Officer  
scq8@cdc.gov  
111-111-1111

**30. Remarks**

Department Authority

**Federal Award Information****11. Award Number**

6 NH75OT000029-01-05

**12. Unique Federal Award Identification Number (FAIN)**

NH75OT000029

**13. Statutory Authority**

317(K)(2) OF PHSA 42USC 247B(K)(2)

**14. Federal Award Project Title**

Oregon proposes a comprehensive strategy to eliminate COVID-19 health inequities while building a sustainable governmental and community-based public health workforce.

**15. Assistance Listing Number**

93.391

**16. Assistance Listing Program Title**

Activities to Support State, Tribal, Local and Territorial (STLT) Health Department Response to Public Health or Healthcare Crises

**17. Award Action Type**

Terminate

**18. Is the Award R&D?**

No

**Summary Federal Award Financial Information****19. Budget Period Start Date** 06/01/2021 - **End Date** 03/24/2025**20. Total Amount of Federal Funds Obligated by this Action**

\$0.00

20a. Direct Cost Amount

\$0.00

20b. Indirect Cost Amount

\$0.00

**21. Authorized Carryover**

\$0.00

**22. Offset**

\$0.00

**23. Total Amount of Federal Funds Obligated this budget period**

\$33,925,082.00

**24. Total Approved Cost Sharing or Matching, where applicable**

\$0.00

**25. Total Federal and Non-Federal Approved this Budget Period**

\$33,925,082.00

**26. Period of Performance Start Date** 06/01/2021 - **End Date** 03/24/2025**27. Total Amount of the Federal Award including Approved Cost Sharing or Matching this Period of Performance**

\$33,925,082.00

**28. Authorized Treatment of Program Income**

ADDITIONAL COSTS

**29. Grants Management Officer - Signature**

Mrs. Erica Stewart

Team Lead, Grants Management Officer

**Recipient Information****Recipient Name**

OREGON HEALTH AUTHORITY

500 SUMMER ST NE E32

Oregon Health Authority, Public Health Division

SALEM, OR 97301-1064

[NO DATA]

**Congressional District of Recipient**

05

**Payment Account Number and Type**

1936001752A1

**Employer Identification Number (EIN) Data**

936001752

**Universal Numbering System (DUNS)**

878144021

**Recipient's Unique Entity Identifier (UEI)**

HFJRBHKCBPR5

**31. Assistance Type**

Project Grant

**32. Type of Award**

Other

**33. Approved Budget**

(Excludes Direct Assistance)

I. Financial Assistance from the Federal Awarding Agency Only	
II. Total project costs including grant funds and all other financial participation	
a. Salaries and Wages	\$4,761,920.00
b. Fringe Benefits	\$2,857,152.00
c. Total Personnel Costs	\$7,619,072.00
d. Equipment	\$0.00
e. Supplies	\$53,230.00
f. Travel	\$264,108.00
g. Construction	\$0.00
h. Other	\$479,910.00
i. Contractual	\$20,421,730.00
j. TOTAL DIRECT COSTS	\$28,838,050.00
k. INDIRECT COSTS	\$5,087,032.00
l. TOTAL APPROVED BUDGET	\$33,925,082.00
m. Federal Share	\$33,925,082.00
n. Non-Federal Share	\$0.00

**34. Accounting Classification Codes**

FY-ACCOUNT NO.	DOCUMENT NO.	ADMINISTRATIVE CODE	OBJECT CLASS	ASSISTANCE LISTING	AMT ACTION FINANCIAL ASSISTANCE	APPROPRIATION
1-9390H06	21NH75OT000029C5	OT	41.51	93.391	\$0.00	75-2122-0140

**DEPARTMENT OF HEALTH AND HUMAN SERVICES Notice of Award**

Centers for Disease Control and Prevention

Award# 6 NH75OT000029-01-05

FAIN# NH75OT000029

Federal Award Date: 03/24/2025

**Direct Assistance**

BUDGET CATEGORIES	PREVIOUS AMOUNT (A)	AMOUNT THIS ACTION (B)	TOTAL (A + B)
Personnel	\$ 0.00	\$ 0.00	\$ 0.00
Fringe Benefits	\$ 0.00	\$ 0.00	\$ 0.00
Travel	\$ 0.00	\$ 0.00	\$ 0.00
Equipment	\$ 0.00	\$ 0.00	\$ 0.00
Supplies	\$ 0.00	\$ 0.00	\$ 0.00
Contractual	\$ 0.00	\$ 0.00	\$ 0.00
Construction	\$ 0.00	\$ 0.00	\$ 0.00
Other	\$ 0.00	\$ 0.00	\$ 0.00
Total	\$ 0.00	\$ 0.00	\$ 0.00

## AWARD ATTACHMENTS

OREGON HEALTH AUTHORITY

6 NH75OT000029-01-05

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1. Terms & Conditions

## **TERMS AND CONDITIONS OF AWARD**

**Termination:** The purpose of this amendment is to terminate this award which is funded by COVID-19 supplemental appropriations. The termination of this award is for cause. HHS regulations permit termination if “the non-Federal entity fails to comply with the terms and conditions of the award”, or separately, “for cause.” The end of the pandemic provides cause to terminate COVID-related grants and cooperative agreements. These grants and cooperative agreements were issued for a limited purpose: to ameliorate the effects of the pandemic. Now that the pandemic is over, the grants and cooperative agreements are no longer necessary as their limited purpose has run out. Termination of this award is effective as of the date set out in your Notice of Award.

No additional activities can be conducted, and no additional costs may be incurred. Unobligated award balances will be de-obligated by CDC.

**Closeout:** In order to facilitate an orderly closeout, we are requesting that you submit all closeout reports identified below within thirty (30) days of the date of this NoA. Submit the documentation as a “Grant Closeout” amendment in GrantSolutions. The reporting timeframe is the full period of performance. Please note, if you fail to submit timely and accurate reports, CDC may also pursue other enforcement actions per 45 CFR Part 75.371.

**Final Performance/Progress Report:** This report should include the information specified in the Notice of Funding Opportunity (NOFO). At a minimum, the report will include the following:

- Statement of progress made toward the achievement of originally stated aims.
- Description of results (positive or negative) considered significant.
- List of publications resulting from the project, with plans, if any, for further publication.

**Final Federal Financial Report (FFR, SF-425):** The FFR should only include those funds authorized and expended during the timeframe covered by the report. The final report must indicate the exact balance of unobligated funds and may not reflect any unliquidated obligations. Should the amount not match with the final expenditures reported to the Payment Management System (PMS), you will be required to update your reports to PMS accordingly.

**Equipment and Supplies - Tangible Personal Property Report (SF-428):** A completed SF-428 detailing all major equipment acquired with a unit acquisition cost of \$10,000 or more. If no equipment was acquired under the award, a negative report is required